

Patrol Score Sheet

DATE: _____

LOCATION: _____

HANDLER'S NAME: _____

K-9'S NAME: _____

AGENCY'S NAME & STATE: _____

(DO NOT WRITE BELOW THIS LINE)

OBEDIENCE:

(MUST BE PASSED TO CONTINUE)

	PASS	FAIL
HEELING	_____	_____
URNS	_____	_____
DROP OFF	_____	_____
STAY ON GUNFIRE	_____	_____
EXERCISE:	_____	_____

Certifying Official & #: _____

AREA SEARCH:

	PASS	FAIL
DEPLOYMENT	_____	_____
ABILITY TO READ K-9	_____	_____
TACTICS	_____	_____
INDICATION/FIND	_____	_____
EXERCISE:	_____	_____

Certifying Official & #: _____

CRIMINAL APPREHENSION:

(MUST BE PASSED TO CERTIFY)

	PASS	FAIL
DEPLOYMENT	_____	_____
RECALL	_____	_____
BITE	_____	_____
RELEASE (***)	_____	_____
EXERCISE:	_____	_____

Optional Suspect Frisk _____

Certifying Official & #: _____

BUILDING SEARCH:

	PASS	FAIL
DEPLOYMENT	_____	_____
ABILITY TO READ K-9	_____	_____
TACTICS	_____	_____
INDICATION/FIND	_____	_____
EXERCISE:	_____	_____

Certifying Official & #: _____

COURAGE TEST:

(MUST BE PASSED TO CERTIFY)

	PASS	FAIL
EXERCISE:	_____	_____

Certifying Official & #: _____

CERTIFICATION:

PASSED _____

FAILED _____

OPTIONAL - HANDLER PROTECTION:

PASS _____

FAIL _____

Certifying Official & #: _____

E-COLLAR WORN:

YES _____

NO _____